TOWN OF LOS GATOS

Business #: _____

Finance Department Business License Tax Division P.O. Box 697, Los Gatos, CA 95031

SIC Code: ___

Phone: 408-354-6835 | Fax: 408-354-7593

☐ RENEWAL

OWN OF GATES

APPLICATION

BUSINESS TAX AND LICENSING

□ NEW APPLICATION

Auctioneer

herein.

SIGNATURE:

INSTRUCTIONS:

	 \$ All questions on this form must be answered or designated not applicable (N/A) where appropriate. \$ Additional information may be required pursuant to Los Gatos Town Code, Chapter 14. \$ In compliance with requirements of the State Controller=s Office, a Business Tax Certificate (License) will not be 							
PLEAS	•	the following informa		,	, , , , , , , , , , , , , , , , , , , ,	,		
1.	Business Name:							
	Posto es Addoses							
	Business Address:	Number	Street		City	State	ZIP	
	Business Telephone #:	Business Telephone #: Fax:						
	Billing Address:							
	(If different)	Number	Street		City	State	ZIP	
	Type of Business (Please	be specific):						
2.	Type of Ownership (Chec	ck <u>one</u> only):						
	[] Partnership	[] Corporation	[] Trust	[] Sole Proprie	etorship [] LLC		
	Owner(s) Name:							
	Owner(s) Telephone #: Owner(s) Cellphone #:							
	Owner(s) Residence:						ZIP	
3.	At least oneof the follow\$Federal Employ\$State Employer\$Board of Equali	ver ID #: ID #:			City			
4.	Complete the following:							
	Processing Fe	/year annually After A After Ju After O n-Town BL Processing	January 1 through Dece pril 1	own BL Processing Fee	е []\$30.00 В	L Renewal		
	 It shall be unlay Town without f If a business gapproval/comp I understand the in violation of a 	riod is from January — wful for any person to irst having procured a plans to establish wi diance of zoning requi nat obtaining this bus any Local, State, or Fe	December, renewable and transact and carry on any a license from the Town. So thin Town limits, the Playrements for the pending beiness license will not authorized and the deral law. I understand the gor changing the busine	business, trade, profect.14.10.015 anning Division of Cousiness location. orize me to use the phat it is my obligation	ommunity Deve	elopment requir	es	
I DECL	ARE UNDER PENALTY OF PERJ	JURY that the foregoin	g is true and correct and if	called as witness I cou	ıld competently	testify to the fac	ts contained	

______ TITLE: ______ DATE: _____

* Under federal and state law, compliance with disability access laws is a serious and significant responsibility that applies to all California building owners and tenants with building open to the public. You may obtain information about your legal obligations and how to comply with disability access laws at the following agencies:

The Division of the State Architect at www.dgs.ca.gov/dsa/Home.aspx.

The Department of Rehabilitation at www.rehab.cahwnet.gov.

The California Commission on Disability Access at www.ccda.ca.gov.